(b) whether this sad State of affairs prevailing since long in this network has been brought to the notice of PM, highlighting that 84 per cent of Government patients seek the advice and treatment of private doctors on account of poor, precarious, negligible treatment and misbehaviour of the staff, leading to drainage of lakhs of public funds; and

(c) if so, the details of remedial action taken in the matter?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) Information is being collected and would be laid on the table of the Sabha.

Primary Health Centres

† 470. SHRI RAM JETHMALANI:
SHRI RAJIV RANJAN SINGH 1ALAN':

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that a decision has been taken to pay more attention to Primary Health Centres in the New Health Policy;

(b) if so, whether Government have formulated any scheme at national level to increase the number of these Health Centres and to improve standard of the service being rendered by these Centres; and

(c) if so, the details thereof and by when, it is likely to be implemented?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) Yes, Sir. The National Health Policy-2002 envisages increased allocation for primary health sector. It also projects that increased aggregate outlay for the primary health sector will be utilized for strengthening the existing facilities and opening additional public health service outlets consistent with the norms for such facilities.

(b) and (c) Government have not formulated any new Scheme. However, the matter was discussed in Tenth Plan Steering Committees of Health and Family Welfare. The Committee recommended that the targets

†Original notice of the Question was received in Hindi.

for Health Centres for the Tenth Plan should be the number of institutions required at each level to fill the gaps in infrastructure as per the norms for 1991 population. Accordingly the targets during the Tenth Plan are proposed to be met by the appropriate reognization and restructuring of existing infrastructure and orientation, skill upgradation and redeployment of existing personnel, opening of new centres and construction activities would be kept to very bare minimum. With a view to improving the standard of sen/ices being rendered at these centres, the Government of India is providing assistance to the States under various schemes such as Basic Minimum Services Programme/Prime Minister's GramodayaYojana, the Reproductive and Child Health Programme, the Sector Investment Programme and Area Projects etc.

Facilities under CGHS in private hospitals

471. SHRI AIMADUDDIN AHMED KHAN (DURRU):
DR. AKHILESH DAS:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether private hospitals to whom lands had been allotted in Delhi by Government on concessional rates are treating/providing facilities to Government employees, including retired personnel covered under the CGHS;

(b) if not, the number and details of such hospitals which are not extending such facilities;

(c) whether such facilities are provided in Apollo Indraprastha Hospital and G.M. Modi Hospital, New Delhi; and

(d) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Private hospitals have been recognised under CGHS Delhi *vide* Department of Health's O.M. dated 7.9.2001 read with O.Ms, dated 15.3.2002,6.5.2002 and 14.5.2002. The recognition of private hospitals under CGHS Delhi has been made in accordance with the Tender Document circulated for the purpose. The said Tender Document did not have any condition that private hospitals